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<b>Attention:</b>	Group Art Unit: 1745	<b>From:</b>	Travis Dodd
<b>Fax:</b>	571-273-8300	<b>Fax:</b>	818-833-2065
<b>Phone:</b>		<b>Phone:</b>	818-833-2014
<b>Company:</b>	U.S. Patent and Trademark Office	<b>Company:</b>	Quallion LLC
		<b>Pages:</b>	Total of (39) Pages
<b>Re:</b>	Application Serial No.: 10/666,790 Title: ELECTRIC STORAGE BATTERY CONSTRUCTION AND METHOD OF MANUFACTURE Filed: September 17, 2003 Examiner: Dah-Wei D. Yuan Group Art Unit: 1745 Attorney Docket No.: Q137-US8	<b>Date:</b>	April 11, 2007

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Amendment Transmittal Letter (2 pages)  
Fee Transmittal (in duplicate) (2 pages)  
Amendment (8 pages)  
Information Disclosure Statement (2 pages), PTO Form 1449 (1 page) and copy of one reference (22 pages)  
Form PTO-2038 Credit Card Authorization (1 page)

Lisa K. Robbins  
(Name of Person Signing Certificate)

(Signature)

Quallion LLC

PO Box 923127, Sylmar, CA 91392-3127 • PH: (818) 833-2000 • FAX: (818) 833-2065

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APR 11 2007

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/666,790
		Filing Date	September 17, 2003
		First Named Inventor	Hiashi Tsukamoto et al.
		Group Art Unit	1745
		Examiner Name	Dah-Wei D. Yuan
Total Number of Pages in This Submission		Attorney Docket Number	
		Q137-US8	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Authorized <input checked="" type="checkbox"/> Amendment After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53	Assignment Papers (for an Application) Drawing(s) Licensing-related Papers Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Address Terminal Disclaimer Request for Refund CD, Number of CD(s) _____	After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div>
Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div>		

Customer Number or Bar Code Label	31815 <i>(Insert Customer No. or Attach bar code label here)</i>
The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.	
Respectfully submitted,	
Dated: <u>4/11/2007</u>	By: 
Phone: (818) 833-2003 Fax: (818) 833-2065	
Travis Dodd Attorneys for Applicant(s) P.O. Box 923127 Sylmar, CA 91392-3127	

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Signature		Date	

APR 11 2007

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		<b>Filing Date</b>	September 17, 2003
		<b>First Named Inventor</b>	Hiashi Tsukamoto et al.
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		<b>Examiner Name</b>	Dah-Wei D. Yuan
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b>	
		Q137-US8	

**ENCLOSURES (check all that apply)**

<input checked="" type="checkbox"/> Fee Transmittal Form	Assignment Papers (for an Application)	After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Authorized	Drawing(s)	Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment	Licensing-related Papers	Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
After Final	Petition to Convert to a Provisional Application	Proprietary Information
Affidavits/declaration(s)	Power of Attorney, Revocation Change of Correspondence Address	Status Letter
Extension of Time Request	Terminal Disclaimer	Other Enclosure(s) (please identify below):
Express Abandonment Request	Request for Refund	
<input checked="" type="checkbox"/> Information Disclosure Statement	CD, Number of CD(s) _____	
Certified Copy of Priority Document(s)	Remarks	
Response to Missing Parts/ Incomplete Application		
Response to Missing Parts under 37 CFR 1.52 or 1.53		

<i>Customer Number or Bar Code Label</i>	31815 <i>(Insert Customer No. or Attach bar code label here)</i>
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The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0921. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

By: 

Travis Dodd  
Attorneys for Applicant(s)  
P.O. Box 923127  
Sylmar, CA 91392-3127

**CERTIFICATE OF MAILING**

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Signature		Date	

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## FEE TRANSMITTAL

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Attorney Docket No.	Q137-US8
First Named Inventor:	TSUKAMOTO, Hisashi et al.
Application Number	10/666,790
Filing Date:	September 17, 2003
Examiner Name:	1745
Group/Art Unit:	Dah-Wei D. Yuan

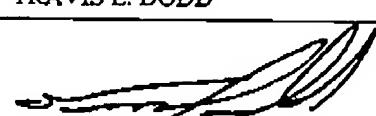
<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 180.00</b>
<b>METHOD OF PAYMENT (check One)</b>	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:  Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC  <input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17  2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card	

## 2. UTILITY Basic Filing Fee &amp; Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$300.00	\$150.00	\$0.00
Total Claims	24 - 24 =	0	X \$50.00	X \$25.00	\$0.00
Independent Claims	1 - 3 =	0	X \$200.00	X \$100.00	\$0.00
Multiple Dependent Claim(s) (if applicable)			\$360.00	\$180.00	\$0.00
<b>Total of above Calculations =</b>					<b>\$0.00</b>
<b>Basic Filing Fee</b>	<b>Large Entity</b>	<b>Small Entity</b>	<b>Total</b>		
Design filing fee	\$ 350.00	\$ 175.00	\$0.00		
Reissue filing fee	\$ 790.00	\$ 395.00	\$0.00		
Provisional filing fee	\$ 160.00	\$ 80.00	\$0.00		
<b>Total of above Calculations =</b>					<b>\$0.00</b>

## 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
Information Disclosure Statement	\$	\$	\$180.00
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL:</b>			<b>\$180.00</b>

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	4/11/2007

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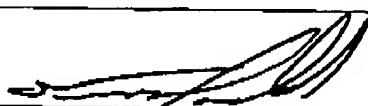
<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 180.00</b>
<b>METHOD OF PAYMENT (check One)</b>	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 50-0921 Deposit Account Name: Quallion LLC</p> <p><input type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input checked="" type="checkbox"/> Other - Credit Card</p>

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Information Disclosure Statement	\$	\$	\$180.00
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL:</b>			<b>\$180.00</b>

Name (print/type)	TRAVIS L. DODD	Registration No.: (Attorney/Agent)	42,491
Signature		Date	4/11/2007